



PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE #6/A
(NVE.)

In re application of: Shaffer et al.

Attorney Docket No.: CISC141/1947

Application No.: 09/527,085

Examiner: Dinh, Khanh Q.

Filed: March 16, 2000

Group: 2155

Title: METHODS AND APPARATUS FOR
REDIRECTING NETWORK TRAFFIC

Technology Center 2100

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CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the U.S. Postal Service with sufficient postage as first-class mail on September 16, 2003 in an envelope addressed to the Commissioner for Patents, P.O. Box 1450 Alexandria, VA 22313-1450.

Signed:

Tara Hayden

AMENDMENT AFTER FINAL

Mail Stop AF
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Sir:

This communication is submitted in response to the Office Action dated July 28, 2003.

Please amend the above-identified application as follows:

Amendments to the claims are reflected in the listing of claims which begins on page 2 of this paper.



AF/2700

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Tara Hayden

AMENDMENT TRANSMITTAL

Mail Stop AF
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

Transmitted herewith is an Amendment in the above-identified application.

The fee has been calculated as shown below.

	Claims After Amendment		Highest Previously Paid For	Present Extra	Small Entity Rate Fee	Large Entity Rate Fee
Total Claims	20	MINUS	27	00	x 9 =	x 18 = 00
Independent Claims	06	MINUS	10	00	x 42 =	x 84 = 00
Multiple Dependent Claim Present and Fee Not Previously Paid					\$140.00	\$280.00
Total					\$	\$

- ☐ Applicant(s) hereby petition for a _____ month extension(s) of time to respond to the aforementioned Office Action.
- ☒ Applicant(s) believe that no (additional) Extension of Time is required; however, if it is determined that such an extension is required, Applicant(s) hereby petition that such an extension be granted and authorize the Commissioner to charge the required fees for an Extension of Time under 37 CFR 1.136 to Deposit Account No. 500388.
- ☐ Enclosed is our Check No. _____ in the amount of \$_____ to cover the additional claim fee and/or extension of time fees.
- ☒ Please charge the required fees, or any additional fees required to facilitate filing the enclosed response, to Deposit Account No. 500388 (Order No. CISC141).

Respectfully submitted,
BEYER WEAVER & THOMAS, LLP

Joseph M. Villeneuve
Reg. No. 37,460

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